

STATEMENT OF ECONOMIC INTERESTS

Date Received  
Official Use Only

RECEIVED COVER PAGE  
FAIR POLITICAL  
PRACTICES COMMISSION

CITY OF COLETA  
CITY CLERK'S OFFICE

Please type or print in ink.

NAME OF FILER (LAST) ACEVES (FIRST) ROGER (MIDDLE)   
11 APR -7 PM 3:30 2011 MAR 14 AM 10:59

1. Office, Agency, or Court

Agency Name

City of Guleta

Division, Board, Department, District, if applicable

Your Position

Council member

► If filing for multiple positions, list below or on an attachment.

Agency: \_\_\_\_\_ Position: \_\_\_\_\_

2. Jurisdiction of Office (Check at least one box)

- ☐ State ☐ Judge (Statewide Jurisdiction)  
☐ Multi-County \_\_\_\_\_ ☐ County of \_\_\_\_\_  
☒ City of Guleta ☐ Other \_\_\_\_\_

3. Type of Statement (Check at least one box)

- ☒ Annual: The period covered is January 1, 2010, through December 31, 2010.  
-or-  
The period covered is \_\_\_\_\_, through December 31, 2010.  
☐ Assuming Office: Date \_\_\_\_\_  
☐ Leaving Office: Date Left \_\_\_\_\_ (Check one)  
☐ The period covered is January 1, 2010, through the date of leaving office.  
☐ The period covered is \_\_\_\_\_, through the date of leaving office.  
☐ Candidate: Election Year \_\_\_\_\_ Office sought, if different than Part 1: \_\_\_\_\_

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 4

- ☒ Schedule A-1 - Investments - schedule attached ☐ Schedule C - Income, Loans, & Business Positions - schedule attached  
☐ Schedule A-2 - Investments - schedule attached ☒ Schedule D - Income - Gifts - schedule attached  
☐ Schedule B - Real Property - schedule attached ☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

I have used all reasonable diligence in preparing this statement. I have reviewed the information herein and in any attached schedules is true and complete. I acknowledge this is

I certify under penalty of perjury under the laws of the State of California that

Date Signed 3-14-11  
(month, day, year)

Signature

# SCHEDULE A-1

## Investments

### Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM **700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Roger S. Aceves

► NAME OF BUSINESS ENTITY  
Deckers Outdoor Corporation

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Shoe Sales

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income of \$0 - \$500  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/09      \_\_\_\_\_/\_\_\_\_\_/09  
 ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income of \$0 - \$500  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/09      \_\_\_\_\_/\_\_\_\_\_/09  
 ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income of \$0 - \$500  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/09      \_\_\_\_\_/\_\_\_\_\_/09  
 ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income of \$0 - \$500  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/09      \_\_\_\_\_/\_\_\_\_\_/09  
 ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income of \$0 - \$500  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/09      \_\_\_\_\_/\_\_\_\_\_/09  
 ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income of \$0 - \$500  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/09      \_\_\_\_\_/\_\_\_\_\_/09  
 ACQUIRED      DISPOSED

Comments: \_\_\_\_\_

# SCHEDULE D Income – Gifts

**CALIFORNIA FORM 700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Roger S. Aceves

► NAME OF SOURCE

Peter Jordano

ADDRESS (Business Address Acceptable)

550 South Patterson Ave, Santa Barbara, CA 93111

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Food Distributor

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 19 / 10	\$ 75.00	Event Breakfast
09 / 10 / 10	\$ 110.00	Chamber Dinner
____ / ____ / ____	\$ _____	_____

► NAME OF SOURCE

Southern California Edison

ADDRESS (Business Address Acceptable)

103 David Love Place, Goleta, 93117

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Utility Company

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
08 / 01 / 10	\$ 148.69	Angel Ticket/food
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

► NAME OF SOURCE

Santa Barbara Chamber of Commerce

ADDRESS (Business Address Acceptable)

924 Anacapa Street #1, Santa Barbara, Ca 93101

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Economic Forecast

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 22 / 10	\$ 175.00	Breakfast Meeting
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

► NAME OF SOURCE

Santa Barbara Lodging and Restaurant Association

ADDRESS (Business Address Acceptable)

P.O Box 40260, Santa Barbara, Ca 93140

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Tourism

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 06 / 10	\$ 80.00	Lunch
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

► NAME OF SOURCE

University California Santa Barbara

ADDRESS (Business Address Acceptable)

UCSB, Santa Barbara, Ca, 93106-5200

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Education

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 09 / 10	\$ 149.00	Soccer tickets, shirts
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

► NAME OF SOURCE

Sempra Energy

ADDRESS (Business Address Acceptable)

101 Ash Street, San Diego, CA 92101

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Utility Co

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 29 / 10	\$ 25.86	Breakfast Meeting
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

Comments: \_\_\_\_\_

# SCHEDULE D Income – Gifts

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name Roger S. Aceves
--

► NAME OF SOURCE  
**Allied Waste Services**  
 ADDRESS (Business Address Acceptable)  
**800 Cacique St, Santa Barbara, CA 93103**  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Trash Haulers**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 19 / 10	\$ 50.00	Xmas Food Basket
/ /	\$	
/ /	\$	

► NAME OF SOURCE  
 ADDRESS (Business Address Acceptable)  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

► NAME OF SOURCE  
 ADDRESS (Business Address Acceptable)  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

► NAME OF SOURCE  
**Marborg Industries**  
 ADDRESS (Business Address Acceptable)  
**136 N Quarantina, Santa Barbara, Ca 93103**  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Trash Haulers**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 21 / 10	\$ 50.00	Xmas Food Basket
/ /	\$	
/ /	\$	

► NAME OF SOURCE  
 ADDRESS (Business Address Acceptable)  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

► NAME OF SOURCE  
 ADDRESS (Business Address Acceptable)  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

Comments: \_\_\_\_\_